03/19/2011 22:21

Image# 11930534985

FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

•		For O	Other Than An	Authorize	d Commit	tee		Office Use Or	nly
1.	NAME OF COMMITTEE (in full)		FEC MAILING LAB PE OR PRINT		ample:If typing er the lines	g, type			
L	Massachusetts Mutual Life I	nsurance	e Company Politica	al Action Com	nmittee				
Ш									
AD	DRESS (number and street)	129	95 State Street						
	Check if different								
L	than previously reported. (ACC)	Spri	ringfield				LMA J	01111	0001
2.	FEC IDENTIFICATION NUM	MBER	~	CITY 🛕		9	STATE	ZIP	CODE A
	C00118943		;	3. IS THIS REPORT		NEW (N) OR		MENDED A)	
4.	TYPE OF REPORT (Choose One)	(b)) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Au	g 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:		X	Mar 20 (M3)	Jun 20 (M6)	Se	o 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15			Apr 20 (M4))	Jul 20 (M7)	Oc	t 20 (M10)	Jan 31 (YE)
	Quarterly Report(C	Q1)	(c) 12-Day		Primary (12	P)	General	(12G)	Runoff (12R)
	July 15 Quarterly Report(C	Q2)	PRE-Electio			· -	=		, ,
	October 15 Quarterly Report(0	23)	Report for the	ie.	Convention	(120)	Special	(125)	
	January 31 Quarterly Report(Y	.	E	Election on				in t	he ite of
	July 31 Mid-Year Report(Non-electic Year Only) (MY)		(d) 30-Day Post -Electi Report for th		General (30	G)	Runoff	30R)	Special (30S)
	Termination Repor (TER)	t	'	Election on				in tl Sta	he tte of
5.	Covering Period 0	2	01 201	1	through	02	28	2011	
I ce	ertify that I have examined this	•			and belief it is	s true, correct a	and complete		
Тур	be or Print Name of Treasurer	Mr	r. Bruce C., Frisbie						
Sig	nature of Treasurer Ele <u>ctro</u>	onically F	Filed by Mr. Bruc	e C., Frisbie		D	ate 0.3	19	2011
NO	TE : Submission of false, erro	neous, c	or incomplete inforr	nation may s	ubject the pers	son signing this	s Report to th	e penalties of 2	U.S.C 437g.
	Office Use							FEC FC	ORM 3X 2/2004)

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/49

Write or Type Committee Name Massachusetts Mutual Life Insurance Company Political Action Committee

D D [®] D 02 0 1 2011 0.2 28 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011 ° 94751.69 January 1 (b) Cash on Hand at 115687.74 Begining of Reporting Period 99037.31 129054.52 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 214725.05 223806.21 6(a) and 6(c) for Column B) 100336.15 91254.99 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 123470.06 123470.06 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 49

Write or Type Committee Name

Massachusetts Mutual Life Insurance Company Political Action Committee

м м 0 2 0 1 м°м 0 2 2 8 2 0 1 1 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 82008.11 88094.64 (i) Itemized (use Schedule A) 16982.02 40891.94 (ii) Unitemized (iii) TOTAL (add 98990.13 128986.58 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 98990.13 128986.58 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 47.18 67.94 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 99037.31 129054.52 12, 13, 14, 15, 16, 17, and 18(c))

99037.31

129054.52

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 49

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	609.54	690.70
	Expenditures(c) Total Operating Expenditures	609.54	690.70
	(add 21(a)(i), (a)(ii) and (b))	609.54	690.70
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	90000.00	99000.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	T T		
	Loans Made Refunds of Contributions To:	0.00	0.00
-	(a) Individuals/Persons Other Than Political Committees	645.45	645.45
			0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	645.45	645.45
9.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	91254.99	100336.15
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	2:27:22	
	from Line 31)	91254.99	100336.15

DETAILED SUMMARY PAGE

of Disbursements

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	98990.13	128986.58
34.	Total Contribution Refunds (from Line 28(d))	645.45	645.45
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	98344.68	128341.13
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	609.54	690.70
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	609.54	690.70

FE6AN026

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any pere name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company Political Action Committee	
	Full Name (Last, First, Middle Initial) PATRICK MURPHY		Date of Receipt
	Mailing Address 32 W 651 HONEY HII		02 / 07 / 2011
	City WAYNE	State Zip Code IL 60184	Transaction ID: 38620892
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
	Name of Employer SELF	Occupation INSURANCE AGENT	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) GREGORY K. LARGE Mailing Address 11 BLANCHARD RD		Date of Receipt
		02 07 2011	
	City GREENWICH	State Zip Code CT 06831-3676	Transaction ID: 38620893 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2500.00
	Name of Employer SELF	Occupation INSURANCE AGENT	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2500.00	
_	Full Name (Last, First, Middle Initial) DAVID S. KATES	<u> </u>	Date of Receipt
	Mailing Address 17 WILLOW GATE		02 08 2011
	City	State Zip Code	Transaction ID: 38626406
	ROSLYN HEIGHTS FEC ID number of contributing federal political committee.	NY 11577-1425	Amount of Each Receipt this Period 500.00
	Name of Employer SELF	Occupation INSURANCE AGENT	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Γ	SUBTOTAL of Receipts This Page (optional) .	ı	4000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 49 (check only one) X
Ai	ny information copied from such Reports and for commercial purposes, other than using th	Statements may be name and add	not be sold or used by any persoress of any political committee to	
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company Po	litical Action Committee	
<u></u>	Full Name (Last, First, Middle Initial) STEPHEN M. SELIGMAN			Date of Receipt
	Mailing Address 120 E 34TH ST APT		70.004	02 08 2011
	City NEW YORK	State NY	Zip Code 10016-4609	Transaction ID: 38626408 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10010 4003	250.00
	Name of Employer SELF	Occupation	ICE AGENT	
	Receipt For: Primary General Other (specify) ▼	_, '	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) ARI B. GREENMAN	-		Date of Receipt
	Mailing Address 317 PRESIDENT ST		02 08 2011	
	City	State	Zip Code	Transaction ID: 38626409
	BROOKLYN	NY	11231-4900	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer SELF	Occupation INSURAN	I NCE AGENT	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		250.00	
	Full Name (Last, First, Middle Initial) JOHN J. MILLER			Date of Receipt
	Mailing Address 13 WHIPPANY AVE			02 08 2011
	City	State	Zip Code	Transaction ID: 38626410
	WARREN	NJ	07059-5774	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer SELF	-, '	ICE AGENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
	UBTOTAL of Receipts This Page (optional)			1100.00

Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) RUSSELL ROLNICK Mailing Address 8 TALL PINES CT City WEST NYACK FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW	Zip Code 94598-4674 On AL INSURANCE AGENT te Year-to-Date Zip Code 10994-1341	Date of Receipt Date of Receipt Transaction ID: 38752233 Amount of Each Receipt this Period Date of Receipt Date of Rece
ROBERT B. FAKHIMI Mailing Address 4140 ARBOLADO DR City State WALNUT CREEK CA FEC ID number of contributing federal political committee. Name of Employer SELF GENEF Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) RUSSELL ROLNICK Mailing Address 8 TALL PINES CT City State WEST NYACK NY FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Aggregative Calculated and the properties of the primary of	94598-4674 on AL INSURANCE AGENT te Year-to-Date ▼ 2000.00 Zip Code 10994-1341	Transaction ID: 38752233 Amount of Each Receipt this Period Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
WALNUT CREEK FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) RUSSELL ROLNICK Mailing Address 8 TALL PINES CT City WEST NYACK FEC ID number of contributing federal political committee. Name of Employer SELF Name of Employer SELF Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Andrew L. Moore Mailing Address 1446 W WESLEY RD NW	94598-4674 on AL INSURANCE AGENT te Year-to-Date ▼ 2000.00 Zip Code 10994-1341	Transaction ID: 38752233 Amount of Each Receipt this Period 2000.00 Date of Receipt M M / D D / Y Y Y Y Y 0 2 1 1 1 Transaction ID: 38759444 Amount of Each Receipt this Period
Full Name of Employer SELF Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) RUSSELL ROLNICK Mailing Address 8 TALL PINES CT City WEST NYACK FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary General Occupat INSUR Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW	on AL INSURANCE AGENT te Year-to-Date Zip Code 10994-1341	Date of Receipt M M M / D D / Y Y Y Y Y 0 2 1 1 1 Transaction ID: 38759444 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) RUSSELL ROLNICK Mailing Address 8 TALL PINES CT City State WEST NYACK FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW	AL INSURANCE AGENT te Year-to-Date 2000.00 Zip Code 10994-1341	Transaction ID: 38759444 Amount of Each Receipt this Period
RUSSELL ROLNICK Mailing Address 8 TALL PINES CT City State WEST NYACK NY FEC ID number of contributing federal political committee. Name of Employer SELF Occupat INSUR/ Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW	10994-1341	Transaction ID: 38759444 Amount of Each Receipt this Period
WEST NYACK FEC ID number of contributing federal political committee. Name of Employer SELF Name of Employer SELF Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW	10994-1341	Transaction ID: 38759444 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW		
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW	on	
Primary General Other (specify) Full Name (Last, First, Middle Initial) ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW	ANCE AGENT	
ANDREW L. MOORE Mailing Address 1446 W WESLEY RD NW	te Year-to-Date ▼ 300.00	
		Date of Receipt
City State	Zip Code	0 2 1 5 2 0 1 1 Transaction ID: 38782206
ATLANTA GA	30327-1814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		5000.00
Name of Employer Occupat SELF GENEF	on AL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼ Aggrega	te Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional)		7300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 49 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the	atements mag	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance C	Company P	olitical Action Committee	
Full Name (Last, First, Middle Initial) SHELLEY M. FIORE			Date of Receipt
Mailing Address 4760 SURFWOOD DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38782207
COMMERCE TWP	MI	48382-1341	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer SELF	Occupatio GENERA	n AL INSURANCE AGENT	1
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) DENNIS R. FIORE			Date of Receipt
Mailing Address 4760 SURFWOOD DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 38782208
COMMERCE TWP	MI	48382-1341	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer SELF	Occupatio GENERA	n AL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) JON A. HENDERSON			Date of Receipt
Mailing Address 205 EDELWEISS DR			0 2 1 5 2 0 1 1
City	State	Zip Code	Transaction ID: 38782210
WEXFORD	PA	15090-9468	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer SELF	Occupatio GENERA	n AL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional)			6000.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance (on for the purpose of soliciting contributions o solicit contributions from such committee.
2	Full Name (Last, First, Middle Initial)	Company F	onical Action Committee	
۹.	GARY E. LEWIS Mailing Address 5719 WORTHAM LN			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State TX	Zip Code	Transaction ID: 38783860
	DALLAS FEC ID number of contributing federal political committee.	C	75252-4982	Amount of Each Receipt this Period 2000.00
	Name of Employer SELF	Occupation	n AL INSURANCE AGENT	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2000.00	
- 3.	Full Name (Last, First, Middle Initial) MATTHEW J. DOBBIE Mailing Address 3 WOODSTOCK CT			Date of Receipt
	City	State	Zip Code	0 2 1 5 2 0 1 1 Transaction ID: 38783862
	MECHANICSBURG	PA	17050-8230	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2000.00
	Name of Employer SELF	Occupation GENER/	on AL INSURANCE AGENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	
-).	Full Name (Last, First, Middle Initial) DAVID J. MEANS			Date of Receipt
	Mailing Address 2940 FOX ST			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ORONO	State MN	Zip Code 55356-9384	Transaction ID: 38783898 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2000.00
	Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	
	SUBTOTAL of Receipts This Page (optional)			6000.00
}	TOTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions solicit contributions from such committee.
	Massachusetts Mutual Life Insurance	Company P	olitical Action Committee	
۸.	Full Name (Last, First, Middle Initial) GREGORY A. MCROBERTS			Date of Receipt
	Mailing Address 9400 TIMBERWOLF L	.N		02 15 2011
	City ZIONSVILLE	State IN	Zip Code 46077-8323	Transaction ID: 38783899 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10077 0020	2000.00
	Name of Employer SELF	Occupatio	n AL INSURANCE AGENT	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 2000.00	
 3.	Full Name (Last, First, Middle Initial) LUIS A. HERNANDEZ			Date of Receipt
	Mailing Address 3615 HARLANO ST			02 15 2011
	City	State FL	Zip Code	Transaction ID: 38783900
	CORAL GABLES FEC ID number of contributing federal political committee.	C	33134-7119	Amount of Each Receipt this Period 2000.00
	Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2000.00	
- ;.	Full Name (Last, First, Middle Initial) FRANK E. WOODRUFF			Date of Receipt
	Mailing Address 10101 REUNION PL			02 15 2011
	City SAN ANTONIO	State TX	Zip Code 78216-4160	Transaction ID: 38783901 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	7.0210 1.00	2000.00
	Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	
	SUBTOTAL of Receipts This Page (optional)			6000.00
	TOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 49 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
1	ce Company Political Action Committee	
Full Name (Last, First, Middle Initial) TIMOTHY M. LUDWIG		Date of Receipt
Mailing Address 120 PARTRIDGE R		02 / 15 / 2011
City EAST GREENWICH	State Zip Code RI 02818-1141	Transaction ID: 38783902 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MICHAEL J. EMERY, CLU Mailing Address 6155 RYAN VALLE	V DD	Date of Receipt
Mailing Address 6100 RTAIN VALLE	ז טה	02 15 2011
City BELMONT	State Zip Code MI 49306-8002	Transaction ID: 38783903
FEC ID number of contributing federal political committee.	MI 49306-8002	Amount of Each Receipt this Period 2000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) JON A. LAW		Date of Receipt
Mailing Address 5 MANN DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LIVERPOOL	State Zip Code NY 13088-5477	Transaction ID: 38783904
FEC ID number of contributing federal political committee.	NY 13088-5477	Amount of Each Receipt this Period 2000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2000.00	
	l)	5000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 49 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insuran	ice Company Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) ROBERT F. HARTNETT			Date of Receipt
Mailing Address 65 COURTER AVE	<u> </u>		0 2 1 8 2 0 1 1
City MAPLEWOOD	State NJ	Zip Code 07040-2819	Transaction ID: 38798417 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer SELF	Occupation INSURAL	n NCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) JEFFREY C. GRAVES			Date of Receipt
Mailing Address 5909 DALECROSS	S CT		0 2 1 8 2 0 1 1
City	State	Zip Code	Transaction ID: 38800355
GLEN ALLEN	VA	23059-6963	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) JOSEPH F. SPARACIO			Date of Receipt
Mailing Address 9 MONTAUK AVEN	NUE EXT		0 2 1 8 2 0 1 1
City SAG HARBOR	State NY	Zip Code 11963-3509	Transaction ID: 38800356 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	11300 0300	2000.00
Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		4300.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by any perso sing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	rance Company Political Action Committee	
Full Name (Last, First, Middle Initial) DAVID A. PEARRE, II		Date of Receipt
Mailing Address 1140 OAK GRO	VE LN	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 38800357
LAKE FOREST	IL 60045-1631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) PAUL E. KARLITZ		Date of Receipt
Mailing Address 18 BRIARCLIFF	RD	02 18 2011
City	State Zip Code	Transaction ID: 38800710
TENAFLY	NJ 07670-2902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer SELF	Occupation INSURANCE AGENT	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) GREGORY A. BLUM		Date of Receipt
Mailing Address 13 FOX MEADC	OW CT	02 18 2011
City	State Zip Code	Transaction ID: 38800712
WOODBURY	NY 11797-1505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (opti	ional)	3300.00

TOTAL This Period (last page this line number only)

ITEMIZED		atements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF CO	al purposes, other than using the DMMITTEE (In Full) etts Mutual Life Insurance C			solicit contributions from such committee.
A. GARY P. RAN	ast, First, Middle Initial) FTLE PSS 3 N EQUESTRIAN CT			Date of Receipt
		0	7: 0 1	02 18 2011
City <u>HAUPPAU(</u>	3F	State NY	Zip Code 11788-3334	Transaction ID: 38800714 Amount of Each Receipt this Period
` <u> </u>	per of contributing	C	11760 0004	2000.00
Name of Emp SELF	oloyer	Occupatio GENERA	n AL INSURANCE AGENT	
Receipt For: Primary Other (s	General	Aggregate	e Year-to-Date ▼ 2000.00	
B. STEVEN WEI				Date of Receipt
Mailing Addre	ess 21 PUDDINGSTONE F	RD		02 18 2011
City		State	Zip Code	Transaction ID: 38802794
MORRIS P	LAINS	NJ	07950-1114	Amount of Each Receipt this Period
FEC ID numb federal politica	per of contributing all committee.	C		1000.00
Name of Emp SELF	oloyer	Occupatio GENERA	n AL INSURANCE AGENT	
Receipt For: Primary Other (s	General	Aggregate	e Year-to-Date ▼ 1000.00]
Full Name (La	ast, First, Middle Initial) ANDREWS			Date of Receipt
Mailing Addre	ess 13310 INDIAN CREEK	RD		02 18 2011
City		State	Zip Code	Transaction ID: 38802829
<u>HOUSTON</u>		TX	77079-7139	Amount of Each Receipt this Period
FEC ID numb federal politica	per of contributing al committee.	C		5000.00
Name of Emp SELF	oloyer	Occupatio GENERA	n AL INSURANCE AGENT	
Receipt For: Primary Other (s	General	Aggregate	e Year-to-Date ▼ 5000.00]
SUBTOTAL of	Receipts This Page (optional)			8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16
	nd Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insuran	ce Company Political Action Committee	
Full Name (Last, First, Middle Initial) MARK E. BURSON		Date of Receipt
Mailing Address 6716 NW 111TH C		0 2 1 8 2 0 1 1
City OKLAHOMA CITY	State Zip Code OK 73162-4735	Transaction ID: 38802845 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 75102 4733	2000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) CHARLES J. WHIPPLE, III		Date of Receipt
Mailing Address 1970 DEER RUN		02 18 2011
City	State Zip Code	Transaction ID: 38802855
MEADOWBROOK	PA 19046-1326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) TERRANCE P. MCMAHON		Date of Receipt
Mailing Address 50 WINDING RD		02 D D Y Y Y Y Y Y Y Y Z 2 1 1
City	State Zip Code	Transaction ID: 38811426
BEDFORD	NH 03110-5656	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (options	al)	5000.00

SCHEDULE A (FEC Form : ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 49 (check only one) X 11a
or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to ance Company Political Action Committee	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) CARL L. KICKHAM Mailing Address 12715 CLAYTON City SAINT LOUIS FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary General	State Zip Code MO 63131-1105 C Occupation GENERAL INSURANCE AGENT Aggregate Year-to-Date	Date of Receipt M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) FERNANDO F. LOPEZ Mailing Address 1483 AVE ASHF		Date of Receipt M
City SAN JUAN FEC ID number of contributing federal political committee. Name of Employer SELF Receipt For: Primary General Other (specify)	State Zip Code PR 00907-1515 C Occupation GENERAL INSURANCE AGENT Aggregate Year-to-Date 2000.00	Transaction ID: 38811668 Amount of Each Receipt this Period 2000.00
Full Name (Last, First, Middle Initial) TODD A. REID Mailing Address 5811 COVE CRE City MURRAY FEC ID number of contributing	State Zip Code UT 84107-6649	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
receipt For: Primary Other (specify)	Occupation GENERAL INSURANCE AGENT Aggregate Year-to-Date 1000.00	1000.00
SUBTOTAL of Receipts This Page (option	onal)	5000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any i	information copied from such Reports and s r commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company P	olitical Action Committee	
	ull Name (Last, First, Middle Initial) ETER S. NOVAK			Date of Receipt
M	failing Address 168 COLONY RD			02 / 23 / 2011
	ity	State	Zip Code	Transaction ID: 38811670
┕	ONGMEADOW	MA	01106-1256	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		2000.00
N S	ame of Employer ELF	Occupatio GENERA	n AL INSURANCE AGENT	
R	eceipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		2000.00]
	ull Name (Last, First, Middle Initial) OSEPH L. DILEO			Date of Receipt
M	failing Address 60 GALILEO			02 25 2011
	ity	State	Zip Code	Transaction ID: 39249969
<u>V</u>	VILLIAMSVILLE	NY	14221-2777	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		1000.00
N S	lame of Employer ELF	Occupatio GENERA	n AL INSURANCE AGENT	
R	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1000.00	
	ull Name (Last, First, Middle Initial) IMBERLY A. MICHEL			Date of Receipt
M	failing Address 16880 AVENIDA DES	ANT		02 / 25 / 2011
	ity	State	Zip Code	Transaction ID: 39249970
	PACIFIC PALIS	CA	90272	Amount of Each Receipt this Period
fe	EC ID number of contributing ederal political committee.	C		2000.00
N S	lame of Employer ELF	Occupatio GENERA	n AL INSURANCE AGENT	
R	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2000.00	
SUE	BTOTAL of Receipts This Page (optional) .			5000.00
	FAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 49 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	the name and address of any political committee ce Company Political Action Committee	to solicit contributions from such committee.
Wassacriusetts Widtual Elle Ilisurario	se company i ontical Action committee	
Full Name (Last, First, Middle Initial) ROBERT P. BURKE		Date of Receipt
Mailing Address 1700 STONE CHUR City	RCH CT State Zip Code	02 25 2011
VIRGINIA BCH	VA 23455-7027	Transaction ID: 39249971 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer SELF	Occupation GENERAL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) PETER W. GREENBERG		Date of Receipt
Mailing Address 700 HEMPSTEAD A	AVE	0 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39249999
ROCKVILLE CTR	NY 11570-1351	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer SELF	Occupation INSURANCE AGENT	
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify)	300.00	
Full Name (Last, First, Middle Initial) JEFFREY A. KEIM		Date of Receipt
Mailing Address 6127 FOREST EDG	GE DR	02 08 2011
City	State Zip Code	Transaction ID: 39281223
WHITEHOUSE	OH 43571-9744	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.00
Name of Employer SELF	Occupation INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$10.00 This changes the YTD Total to \$0.00
CURTOTAL of Descripts This Descriptions)	5300.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 49 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	ce Company Political Action Committee	
Full Name (Last, First, Middle Initial) BRIAN K. PITANIELLO		Date of Receipt
Mailing Address 5403 20TH ST		02 09 2011
City LUBBOCK	State Zip Code TX 79407-2111	Transaction ID: 39281224 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.00
Name of Employer SELF	Occupation INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$125.00 This changes the YTD Total to \$0
Full Name (Last, First, Middle Initial) SAMUEL H. SCHIFFER		Date of Receipt
Mailing Address 509 EDGEBROOK I	LN	M M / D D / Y Y Y Y Y O 1 1 1 2 0 1 1
City WEST PALM BEACH	State Zip Code FL 33411-5302	Transaction ID: 39281225 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.00
Name of Employer SELF	Occupation INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ -100.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$100.00 This changes the YTD Total to \$-1-00.00
Full Name (Last, First, Middle Initial) ALLEN W. CARR	•	Date of Receipt
Mailing Address 427 RHODA DR		02 18 2011
City LANCASTER	State Zip Code PA 17601-3669	Transaction ID: 39281226 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.00
Name of Employer SELF	Occupation INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ -150.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$150.00 This changes the YTD Total to \$-1-50.00
SUBTOTAL of Receipts This Page (optional		0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurar	nce Company Political Action Committee	
Full Name (Last, First, Middle Initial) William C. Haycox		Date of Receipt
Mailing Address 513 58TH ST		0 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City VIRGINIA BCH	State Zip Code VA 23451-2230	Transaction ID: 39281227 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.00
Name of Employer SELF	Occupation INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ -100.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$100.00 This changes the YTD Total to \$-1-00.00
Full Name (Last, First, Middle Initial) Louis F. Grammes		Date of Receipt
Mailing Address 6105 STEPHENS (CROSSI	M M / D D / Y Y Y Y Y O D D / 28 2011
City MECHANICSBURG	State Zip Code PA 17050-2371	Transaction ID: 39281228
FEC ID number of contributing federal political committee.	C 17030 2371	Amount of Each Receipt this Period 0.00
Name of Employer SELF	Occupation INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 41.70	[MEMO ITEM] Refund(s) on Schedule B Totaling \$41.70 This changes the YTD Total to \$41
Full Name (Last, First, Middle Initial) T.J. Shaughnessy		Date of Receipt
Mailing Address 133 RIVERWALK	WAY	M M / D D / Y Y Y Y Y O D D / 28 2011
City MANCHESTER	State Zip Code NH 03101-2642	Transaction ID: 39281229
FEC ID number of contributing federal political committee.	C 03101-2642	Amount of Each Receipt this Period 0.00
Name of Employer SELF	Occupation INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$100.00 This changes the YTD Total to \$0
	al)	0.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 49 (check only one) X 11a
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may be name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	Massachusetts Mutual Life Insurance	Company Po	olitical Action Committee	
_	Full Name (Last, First, Middle Initial) PATRICK D. OLSEN			Date of Receipt
	Mailing Address 2505 DEVILS GLEN	RD		02 / 28 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 39281230
	BETTENDORF	<u>IA</u>	52722-6715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		0.00
	Name of Employer SELF	Occupation INSURAL	n NCE AGENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	[MEMO ITEM]
	Primary General Other (specify) ▼		18.75	Refund(s) on Schedule B Totaling \$18.75 This changes the YTD Total to \$18
	Full Name (Last, First, Middle Initial) MR. MARK ROELLIG	<u>'</u>		Date of Receipt
	Mailing Address 11 COBTAIL WAY	02 / 28 / 2011		
	City	State	Zip Code	Transaction ID: PR1120475421679
	SIMSBURY	CT	06070-2530	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		405.60
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	_, .	ENERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 811.20	P/R Deduction (\$192.30 Bi-Weekly)
_	Full Name (Last, First, Middle Initial)			
	MS. DEBRA PALERMINO			Date of Receipt
	Mailing Address 168 CENTERWOOD			02 / 28 / 2011
	City	State	Zip Code	Transaction ID: PR1156272821679
	NEWINGTON	CT	06111-3110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		196.74
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	- ' '	IVE VICE PRESIDENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 393.48	P/R Deduction (\$98.37 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		602.34

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance (
∠ \.	Full Name (Last, First, Middle Initial) Sean Gooden		Date of Receipt
	Mailing Address 10151 WOODROSE L		02 28 2011
	City HIGHLANDS RANCH	State Zip Code CO 80129-5404	Transaction ID: PR1233883021679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer SELF	Occupation INSURANCE AGENT	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$125.00 Monthly)
 3.	Full Name (Last, First, Middle Initial) MR. BRADLEY LUCIDO		Date of Receipt
	Mailing Address 65 ROSEWOOD DR		0 2 2 8 2 0 1 1
	City	State Zip Code	Transaction ID: PR1285753921679
	SUFFIELD	CT 06078-2014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	197.40
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP CHIEF COMPL OFF & ASSO	C GEN COUNSE
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 394.80	P/R Deduction (\$98.70 Bi- Weekly)
_ ;.	Full Name (Last, First, Middle Initial) MR. ROBERT STINGLE		Date of Receipt
	Mailing Address 30 CIDERMILL HTS		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1322703221679
	NORTH GRANBY FEC ID number of contributing federal political committee.	CT 06060-1430	Amount of Each Receipt this Period 287.92
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SENIOR VICE PRESIDENT & GET	NERAL AUDITO
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 575.84	P/R Deduction (\$143.96 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)		610.32

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 1
4	ny information copied from such Reports and s r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company Po	olitical Action Committee	
_	Full Name (Last, First, Middle Initial) MR. GREGORY E DEAVENS			Date of Receipt
	Mailing Address 10 HENLEY COMMO			02 28 2011
	City	State CT	Zip Code	Transaction ID: PR1342771921679
	FARMINGTON FEC ID number of contributing federal political committee.	C	06032-1553	Amount of Each Receipt this Period 153.90
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupatio SENIOR	n VICE PRESIDENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 307.80	P/R Deduction (\$76.95 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) MR. JOHN W CHANDLER			Date of Receipt
	Mailing Address 118 COLONY RD			02 28 2011
	City	State	Zip Code	Transaction ID: PR1355574321679
	LONGMEADOW	MA	01106-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		190.50
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.		VICE PRESIDENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 381.00	P/R Deduction (\$95.25 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) MR. MICHAEL R FANNING			Date of Receipt
	Mailing Address 140 COLONIAL AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1360837721679
	NORTH ANDOVER	MA	01845-6349	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		394.50
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	- ·	IVE VICE PRESIDENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 789.00	P/R Deduction (\$197.25 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional) .			738.90

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	name and address of any political committee to	on for the purpose of soliciting contributions
Z	Full Name (Last, First, Middle Initial) MR. John Vaccaro	· ,	Date of Receipt
	Mailing Address 18 ANNA MARIE LN		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code MA 01028-3018	Transaction ID: PR1434639321679
	E LONGMEADOW FEC ID number of contributing federal political committee.	MA 01028-3018	Amount of Each Receipt this Period 181.84
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SENIOR VICE PRESIDENT	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 363.68	P/R Deduction (\$76.95 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) MR. ROGER PUTNAM		Date of Receipt
	Mailing Address 7 ELLIOTT DR		02 28 2011
	City	State Zip Code	Transaction ID: PR1479403921679
	SIMSBURY	CT 06070-1669	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	206.30
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SENIOR VICE PRESIDENT	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 412.60	P/R Deduction (\$103.15 Bi- Weekly)
	Full Name (Last, First, Middle Initial) MR. Kevin Rasch		Date of Receipt
	Mailing Address 48 FOX DEN RD		02 28 2011
	City	State Zip Code	Transaction ID: PR1569232321679
	WEST SIMSBURY	CT 06092-2217	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	126.80
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VP & ASSISTANT GENERAL COUN	SEL
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 253.60	P/R Deduction (\$57.70 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		514.94

	FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 49 (check only one)
Α ο	ny information copied from such Reports and S	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance			
_	Full Name (Last, First, Middle Initial) DONALD E. HELMS			Date of Receipt
	Mailing Address 1225 BRAYSTONE TF	RL		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City COLLIERVILLE	State TN	Zip Code 38017-3647	Transaction ID: PR1602275921679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		174.25
	Name of Employer SELF	Occupatio GENERA	n AL INSURANCE AGENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 257.75	P/R Deduction (\$174.25 Monthly)
	Full Name (Last, First, Middle Initial) MS. LAURA CULLISON			Date of Receipt
	Mailing Address 2239 1/2 N LINCOLN	AVE APT 1A		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City CHICAGO	State IL	Zip Code 60614-3738	Transaction ID: PR1824626121679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupatio ASSISTA	n ANT VICE PRESIDENT & CO	DUNSEL
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$62.50 Bi- Weekly)
	Full Name (Last, First, Middle Initial) ALAN L. MELTZER			Date of Receipt
	Mailing Address 6500 ROCK SPRING I	OR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR789845121679
	BETHESDA FEC ID number of contributing federal political committee.	C	20817-1105	Amount of Each Receipt this Period 416.67
	Name of Employer SELF	Occupatio	n NCE AGENT	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	P/R Deduction (\$416.67 Monthly)
_	SUBTOTAL of Receipts This Page (optional)	l		715.92

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27/49 (check only one) X 11a
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insuran	ice Company Po	plitical Action Committee	
Full Name (Last, First, Middle Initial) DALE J. SEYMOUR			Date of Receipt
Mailing Address 2401 WEALDSTON	NE RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TOLEDO	State OH	Zip Code 43617-1304	Transaction ID: PR789875521679 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		167.00
Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 337.00	P/R Deduction (\$167.00 Monthly)
Full Name (Last, First, Middle Initial) David H. Root			Date of Receipt
Mailing Address 1430 POLK ST			0 2 2 8 2 2 0 1 1
City HOLLYWOOD	State FL	Zip Code 33020-5245	Transaction ID: PR789881621679
FEC ID number of contributing federal political committee.	C	33020-3243	Amount of Each Receipt this Period 125.00
Name of Employer SELF	Occupation INSURAL	n NCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$125.00 Monthly)
Full Name (Last, First, Middle Initial) ROBERT T. SINKS			Date of Receipt
Mailing Address 3428 HAMPTON A	VE		0 2 2 8 2 0 1 1
City NASHVILLE	State TN	Zip Code	Transaction ID: PR790086621679
FEC ID number of contributing federal political committee.	C	37215-1408	Amount of Each Receipt this Period 167.00
Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 337.00	P/R Deduction (\$167.00 Monthly)
SUBTOTAL of Receipts This Page (optional	al)	_	459.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate scheduler for each category of the Detailed Summary Page	(Crieck only one)
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any e name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company Political Action Committee	ee
	Full Name (Last, First, Middle Initial) Stephen D. Estler		Date of Receipt
	Mailing Address 2177 NE 63RD ST		02 28 2011
	City FT LAUDERDALE	State Zip Code FL 33308-1330	Transaction ID: PR790109421679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	167.00
	Name of Employer SELF	Occupation INSURANCE AGENT	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	334.0	0 P/R Deduction (\$167.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. ANDREW C DICKEY	·	Date of Receipt
	Mailing Address 1183 LONGMEADOV	V ST	02 28 2011
	City	State Zip Code	Transaction ID: PR790159321679
	LONGMEADOW	MA 01106-2201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	153.84
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP & DEPUTY CHIEF INVEST	TMENT OFFICER
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	307.6	8 P/R Deduction (\$76.92 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) MR. CLIFFORD M NOREEN	Date of Receipt	
	Mailing Address 95 BENT TREE DR		02 28 2011
	City	State Zip Code	Transaction ID: PR790184121679
	E LONGMEADOW	MA 01028-1365	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.32
	Name of Employer BABSON CAPITAL MANAGEMENT LLC	Occupation MANAGING DIRECTOR	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.6	P/R Deduction (\$96.16 Bi-Weekly)
	SURTOTAL of Receipts This Page (optional)		513.16

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements mag	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company P	olitical Action Committee	
. K	Full Name (Last, First, Middle Initial) MR. DAVID J REILLY			Date of Receipt
	Mailing Address 32 JOSHUA DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WEST SIMSBURY	State CT	Zip Code 06092-2124	Transaction ID: PR790206321679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		153.84
	Name of Employer CORNERSTONE RE ADVISERS LLC	Occupatio PRESIDI	n ENT & CEO	
	Receipt For: Primary General		e Year-to-Date ▼	P/R Deduction (\$76.92 Bi-
	Other (specify) ▼		307.68	Weekly)
_	Full Name (Last, First, Middle Initial) MS. Diana K Ruddick	.		Date of Receipt
	Mailing Address 15 SHODDY MILL RI)		02 28 YYYYY 2011
	City	State	Zip Code	Transaction ID: PR790207121679
	GLASTONBURY	CT	06033-3514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		122.40
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupatio VICE PR	n ESIDENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		244.80	P/R Deduction (\$57.70 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) MR. Ed D Youmell			Date of Receipt
	Mailing Address 15 KENSINGTON DF	3		02 28 2011
	City	State	Zip Code	Transaction ID: PR790209521679
	WILBRAHAM	MA	01095-2800	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		126.60
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	-, '	ESIDENT	
	Receipt For: Primary General Other (appoint)	Aggregate	e Year-to-Date ▼ 253.20	P/R Deduction (\$57.70 Bi-
_	Other (specify) ▼	0 0		Weekly)
	SUBTOTAL of Receipts This Page (optional)			402.84

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 49 (check only one) X
A	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company Political Action Committee	
	Full Name (Last, First, Middle Initial) MR. HARVEY BR HOFFMAN		Date of Receipt
	Mailing Address 50 DEVONSHIRE TE		02 28 2011
	City E LONGMEADOW	State Zip Code MA 01028-3139	Transaction ID: PR790231421679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.32
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation CORPORATE VICE PRESIDENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.64	P/R Deduction (\$96.16 Bi-Weekly)
	Full Name (Last, First, Middle Initial) MR. ISADORE JERMYN Mailing Address 18 DUXBURY LN		Date of Receipt
	City	State Zip Code	0 2 2 8 2 0 1 1 Transaction ID: PR790232521679
	LONGMEADOW	MA 01106-2006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	115.40
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP & CHIEF ACTUARY	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.80	P/R Deduction (\$57.70 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) MR. JOHN E DEITELBAUM	. L	Date of Receipt
	Mailing Address 11 MIDDLE RD		02 28 2011
	City	State Zip Code	Transaction ID: PR790248221679
	ELLINGTON FEC ID number of contributing federal political committee.	CT 06029-3615	Amount of Each Receipt this Period 305.10
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP, DEPUTY GENERAL COUNSEI	L & ASST SEC
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 610.20	P/R Deduction (\$152.55 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional) .		612.82

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 49 (check only one) X
Į.	ny information copied from such Reports and r for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company P	olitical Action Committee	
۷.	Full Name (Last, First, Middle Initial) MR. KENNETH S COHEN			Date of Receipt
	Mailing Address 59 WOODLOT RD			02 28 7 2011
	City AMHERST	State MA	Zip Code 01002-3451	Transaction ID: PR790278021679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.002 0.01	269.24
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupatio SVP & D	n EPUTY GENERAL COUNSI	— EL
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 538.48	P/R Deduction (\$134.62 Bi- Weekly)
-	Full Name (Last, First, Middle Initial) MR. KEVIN M SWEENEY	1		Date of Receipt
	Mailing Address 14 ERICKA CIR			02 28 2011
	City	State	Zip Code	Transaction ID: PR790278921679
	E LONGMEADOW FEC ID number of contributing federal political committee.	C	01028-1658	Amount of Each Receipt this Period 115.38
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupatio VICE PR	n RESIDENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.76	P/R Deduction (\$57.69 Bi- Weekly)
. -	Full Name (Last, First, Middle Initial) MR. MARK S HIGGINS			Date of Receipt
	Mailing Address 1290 OAK GROVE P	L		02 28 2011
	City	State	Zip Code	Transaction ID: PR790311021679
	WESTLAKE VILLAGE FEC ID number of contributing federal political committee.	CA	91362-4249	Amount of Each Receipt this Period
	Name of Employer CORNERSTONE RE ADVISERS LLC	Occupatio EXECUT	n IVE VICE PRESIDENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 307.68	P/R Deduction (\$76.92 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1		538.46

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 49 (check only one) X
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	e Company P	olitical Action Committee	
. Z	Full Name (Last, First, Middle Initial) MR. ROBERT CASALE			Date of Receipt
	Mailing Address 30 THISTLE LN			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City BRISTOL	State CT	Zip Code 06010-8057	Transaction ID: PR790342221679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		433.56
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupatio EVP & C		
	Receipt For: Primary General		e Year-to-Date ▼	
	Other (specify) ▼		867.12	P/R Deduction (\$216.78 Bi- Weekly)
	Full Name (Last, First, Middle Initial) MR. RICHARD D BOURGEOIS			Date of Receipt
	Mailing Address 11 ECHO HILL RD			02 28 2011
	City	State	Zip Code	Transaction ID: PR790352221679
	WILBRAHAM	MA	01095-2663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		153.84
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupatio SENIOR	n VICE PRESIDENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		307.68	P/R Deduction (\$76.92 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) MR. ROBERT S ROSENTHAL			Date of Receipt
	Mailing Address 12 SHERWOOD LN			02 28 2011
	City	State	Zip Code	Transaction ID: PR790355421679
	AVON	CT	06001-3215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.40
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.		SOCIATE GENERAL COUN	ISEL
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/P Doduction (\$57.70 Pi
	Other (specify)		230.80	P/R Deduction (\$57.70 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		702.80

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 49 (check only one)
A	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance C			
_	Full Name (Last, First, Middle Initial) MR. Roger W Crandall			Date of Receipt
	Mailing Address 107 HAMPDEN RD			M M / D D / Y Y Y Y O D D / 28 2011
	City SOMERS	State CT	Zip Code 06071-1279	Transaction ID: PR790355921679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		384.62
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation CHAIRM	n AN, PRESIDENT & CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 769.24	P/R Deduction (\$192.31 Bi- Weekly)
	Full Name (Last, First, Middle Initial) MS. SUSAN A MOORE			Date of Receipt
	Mailing Address 70 BROOKS RD			02 28 7 2011
	City LONGMEADOW	State MA	Zip Code 01106-2129	Transaction ID: PR790370121679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		269.24
	Name of Employer BABSON CAPITAL MANAGEMENT LLC	Occupation MANAGI	n NG DIRECTOR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 538.48	P/R Deduction (\$134.62 Bi- Weekly)
	Full Name (Last, First, Middle Initial) JEFFREY C. DOLLARHIDE			Date of Receipt
	Mailing Address 9646 E LAUREL LN			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR790394921679
	SCOTTSDALE FEC ID number of contributing federal political committee.	C	85260-5956	Amount of Each Receipt this Period 416.67
	Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	P/R Deduction (\$416.67 Monthly)
_	SUBTOTAL of Receipts This Page (optional)			1070.53

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 34 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 11
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be so name and address of a	old or used by any persony ny political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company Political A	ction Committee	
ب 4.	Full Name (Last, First, Middle Initial) ALBERTO GUTIERREZ			Date of Receipt
	Mailing Address 8530 SW 84TH CT			02 28 7 2011
	City MIAMI	State Zip (FL 331	Code 43-6914	Transaction ID: PR790522221679 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		125.00
	Name of Employer SELF	Occupation INSURANCE AG	ENT	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-I	Date ▼ 250.00	P/R Deduction (\$125.00 Monthly)
 3.	Full Name (Last, First, Middle Initial) WALTER W. WOLAK Mailing Address 525 ANGELO DR	L		Date of Receipt
	City	State Zip (Code	0 2 2 8 2 0 1 1 Transaction ID: PR790525721679
	BETHLEHEM		17-3735	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		167.00
	Name of Employer SELF	Occupation GENERAL INSU	RANCE AGENT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Date ▼ 417.00	P/R Deduction (\$167.00 Monthly)
 :_	Full Name (Last, First, Middle Initial) Robert L. Belvedere			Date of Receipt
	Mailing Address 74 WINDHAM RD			0 2 2 8 2 0 1 1
	City	·	Code	Transaction ID: PR790530221679
	ROCKVILLE CENTRE FEC ID number of contributing federal political committee.	NY 115	70-1232	Amount of Each Receipt this Period 125.00
	Name of Employer SELF	Occupation INSURANCE AG	ENT	1
	Receipt For: Primary General Other (specify)	Aggregate Year-to-I		P/R Deduction (\$125.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			417.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	ce Company Political Action Committee	
Full Name (Last, First, Middle Initial) MR. THOMAS G DUDECK		Date of Receipt
Mailing Address 17 WINTERBERRY	State Zip Code	02 28 2011
City DEEP RIVER	CT 06417-2126	Transaction ID: PR790544521679 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	115.38
Name of Employer CORNERSTONE RE ADVISERS LLC	Occupation MANAGING DIRECTOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	P/R Deduction (\$57.69 Bi- Weekly)
Full Name (Last, First, Middle Initial) MS. KAREN M PHELAN		Date of Receipt
Mailing Address 48 PINE GROVE CI	IR	02 28 2011
City	State Zip Code	Transaction ID: PR790587421679
EAST LONGMEADOW	MA 01028-1300	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	153.90
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation CORPORATE VICE PRESIDENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.80	P/R Deduction (\$76.95 Bi- Weekly)
Full Name (Last, First, Middle Initial) MR. NORMAN A SMITH		Date of Receipt
Mailing Address 32 LAUREL ST		0 2 2 8 2 0 1 1
City	State Zip Code	Transaction ID: PR790808621679
LONGMEADOW	MA 01106-1124	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	115.38
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP & CONTROLLER	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	P/R Deduction (\$57.69 Bi- Weekly)
SUPTOTAL of Possints This Page (entional	l)	384.66

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company P	olitical Action Committee	
∠ A .	Full Name (Last, First, Middle Initial) MR. DAVID S ALLEN			Date of Receipt
	Mailing Address 41 FOUR MILE RD			02 28 2011
	City	State	Zip Code	Transaction ID: PR790809721679
	WEST HARTFORD	CT	06107-2710	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.40
	Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP & D	n EPUTY GENERAL COUNSI	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		230.80	P/R Deduction (\$57.70 Bi- Weekly)
– В.	Full Name (Last, First, Middle Initial) MR. RODNEY J DILLMAN			Date of Receipt
	Mailing Address 15 CATHERINE LN			0 2 2 8 2 0 1 1
	City	State	Zip Code	Transaction ID: PR790812621679
	SUFFIELD	CT	06078-1931	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		115.38
	Name of Employer MASSMUTUAL INTERNATIONAL	Occupation SENIOR	n VICE PRESIDENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		230.76	P/R Deduction (\$57.69 Bi- Weekly)
- С.	Full Name (Last, First, Middle Initial) STEPHEN K. COLLINS			Date of Receipt
	Mailing Address 341 JOHNSTONE DR			0 2 2 8 2 0 1 1
	City	State	Zip Code	Transaction ID: PR791191521679
	MADISON	MS	39110-6565	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		167.00
	Name of Employer SELF	Occupation GENERA	n AL INSURANCE AGENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		334.00	P/R Deduction (\$167.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			397.78
-	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the such as	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance		•	
Full Name (Last, First, Middle Initial) MS. MELISSA MILLAN			Date of Receipt
Mailing Address 31 SEMINARY RD			M M / D D / Y Y Y Y Y O D D / 28 2011
City SIMSBURY	State CT	Zip Code 06070-2010	Transaction ID: PR791207721679 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		269.24
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SENIOR	n VICE PRESIDENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 538.48	P/R Deduction (\$134.62 Bi- Weekly)
Full Name (Last, First, Middle Initial) MS. ANNE KANDILIS			Date of Receipt
Mailing Address 10 CRESCENT HL			02 28 28 2011
City SPRINGFIELD	State MA	Zip Code 01105-1915	Transaction ID: PR791348021679 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		115.38
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PR	n ESIDENT	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.76	P/R Deduction (\$57.69 Bi- Weekly)
Full Name (Last, First, Middle Initial) MS. ELIZABETH W CHICARES			Date of Receipt
Mailing Address 186 BELLE WOODS	3 DR		0 2 2 8 2 0 1 1
City	State	Zip Code	Transaction ID: PR791351721679
GLASTONBURY FEC ID number of contributing federal political committee.	CT	06033-1667	Amount of Each Receipt this Period 192.32
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SENIOR	n VICE PRESIDENT & CHIEF	FRISK OFF
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.64	P/R Deduction (\$96.16 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)	<u> </u>		576.94

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance	Company Political Action Committee	
Full Name (Last, First, Middle Initial) MR. MICHAEL T ROLLINGS		Date of Receipt
Mailing Address 5 DURHAM RD		02 28 7 2011
City LONGMEADOW	State Zip Code MA 01106-1507	Transaction ID: PR791365821679 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	384.62
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation EXECUTIVE VICE PRESIDENT & CF	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 769.24	P/R Deduction (\$192.31 Bi- Weekly)
Full Name (Last, First, Middle Initial) MR. THOMAS M FINKE		Date of Receipt
Mailing Address 4920 HARDISON RD		02 28 7 2011
City CHARLOTTE	State Zip Code NC 28226-6418	Transaction ID: PR791511921679
FEC ID number of contributing federal political committee.	NC 28226-6418	Amount of Each Receipt this Period 426.58
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation EVP & CHIEF INVESTMENT OFFICE	─ ER
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 853.16	P/R Deduction (\$213.29 Bi- Weekly)
Full Name (Last, First, Middle Initial) MS. PATRICIA WALSH		Date of Receipt
Mailing Address 88 BANCROFT RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR791569721679
NORTHAMPTON FEC ID number of contributing federal political committee.	MA 01060-2111	Amount of Each Receipt this Period 115.38
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SENIOR VICE PRESIDENT	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 230.76	P/R Deduction (\$57.69 Bi- Weekly)
SURTOTAL of Receipts This Page (optional)		926.58

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 49 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any person he name and address of any political committee to s	for the purpose of soliciting contributions
` '	e Company Political Action Committee	
Full Name (Last, First, Middle Initial) MR. PAUL SMITH		Date of Receipt
Mailing Address 70 DOVER RD		02 28 2011
City LONGMEADOW	State Zip Code MA 01106-1254	Transaction ID: PR791859021679 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	138.50
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PRESIDENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 277.00	P/R Deduction (\$69.25 Bi- Weekly)
Full Name (Last, First, Middle Initial) MR. MICHAEL O'CONNOR Mailing Address 41 RELLECT ALRE A		Date of Receipt
Mailing Address 41 BELLECLAIRE A		02 28 2011
City LONGMEADOW	State Zip Code MA 01106-1415	Transaction ID: PR792107721679 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation CORPORATE VP & ASSOC GENERA	COUNSEL
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	P/R Deduction (\$96.15 Bi- Weekly)
Full Name (Last, First, Middle Initial) MS. ELAINE A SARSYNSKI	-	Date of Receipt
Mailing Address 75 BARNDOOR HIL	LS RD	02 28 2011
City	State Zip Code	Transaction ID: PR796671821679
SUFFIELD FEC ID number of contributing federal political committee.	CT 06078-1360	Amount of Each Receipt this Period 192.32
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation EXECUTIVE VICE PRESIDENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.64	P/R Deduction (\$96.16 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		523.12
TOTAL This Period (last page this line numb	· · ·	82008.11

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 49 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance (Company Po	olitical Action Committee	
Α.	Full Name (Last, First, Middle Initial) MassMutual Federal Credit Union			Date of Receipt
	Mailing Address 1295 State Street			02 28 2011
	City	State	Zip Code	Transaction ID: 39275449
	Springfield	MA	01111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.38
	Name of Employer	Occupation	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 61.14	Feb-11 Interest - Money Market Account
В.	Full Name (Last, First, Middle Initial) MassMutual Federal Credit Union			Date of Receipt
	Mailing Address 1295 State Street			0 2 2 8 2 0 1 1
	City	State	Zip Code	Transaction ID: 39275451
	Springfield	MA	01111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		6.80
	Name of Employer	Occupation	n	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 67.94	Feb-11 Interest - Checking Account

SUBTOTAL of Receipts This Page (optional)	•	47.18
TOTAL This Period (last page this line number only)	<u> </u>	47.18

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C.

SCHEDULE B (FEC Form 3X)	Use separate		T		OR LIN			R:			PA	AGE	41 /	49	
ITEMIZED DISBURSEMENTS	for each cated Detailed Sum			Ë	21b 27	H	22 28a	Х	23 28b	F	24 28c	F	25 29	П	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														3	
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance Com	pany Political	Action Com	ımi	itte	ee										
Full Name (Last, First, Middle Initial) TFP-FOJB Committee						- 1	Date o		sburs	er	D / `		0 1 1	Y	
Mailing Address 631-B Pennsylvania Ave.	, SE						0.2	_) 4	4	. 2	011		
,		Code 0003					Amour	nt of	Each	n E	Disburse	-		-	t T
Purpose of Disbursement 2011 Committee Contribution Candidate Name			Ca		gory/					0		60	00.00)	
Office Sought: Senate President State: Disburse	ment For: Primary Other (specify)	General 🔻		Ту	pe		2011 (on	Cor	nmitt	tee	e Cont	ribut	i-		
Full Name (Last, First, Middle Initial) Majority Committee							Date o		sburs	er	D / `		0 1 1	Y	
Mailing Address 104 Hume Avenue								_) 4					
,		Code 2301					Amour	nt of	Each	n E	Disburse				d T
Purpose of Disbursement 2011 PAC Contribution Candidate Name		[_	01 ate	l 1 gory/			•	•			50	00.00)	
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify)	General ▼	7	Ту	pe	2	2011 F	PA(C Co	nt	ributio	1			
Full Name (Last, First, Middle Initial) ERIC PAC						- 1	Date o	f Di	sburs	en					
Mailing Address 25 E. Main Street, Suite 2	200						0 2	M .	D () 4	4 /	Ž	0 1 1	¥	
Richmond		Code 3219					Amour	nt of	Each	n E	Disburse	-	t this f		b b
Purpose of Disbursement 2011 PAC Contribution				01	11		-	-	•			50	00.00	,	
Candidate Name					gory/ pe										
Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General ▼				2	2011 F	PA(C Co	nt	ributio	1			
State: District:		•													
SUBTOTAL of Disbursements This Page (optional) .					<u> </u>							160	00.00)	

TOTAL This Period (last page this line number only)

	et Disbursement For Primary	Zip Code 01103	al committee to	22
urposes, other than us IMITTEE (In Full) s Mutual Life Insur First, Middle Initial) 235 State Stre Unit 204 ursement 10, 2011 House Senate President District: First, Middle Initial) gress PO Box 9394 ursement	et Disbursement For Primary Other (Zip Code 01103 Zip Code 01103 Zip Code 01103	ommittee to	Transaction ID: 38620895 Date of Disbursement M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
IMITTEE (In Full) s Mutual Life Insur First, Middle Initial) 235 State Stre Unit 204 ursement 10, 2011 House Senate President District: First, Middle Initial) gress PO Box 9394 ursement	et State MA Disbursement For Primary Other (Zip Code 01103	O11 Category/	Transaction ID: 38620895 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ursement 10, 2011 House Senate President District: First, Middle Initial) gress PO Box 9394 ursement	et State MA Disbursement For Primary Other (Zip Code 01103	011 Category/	Date of Disbursement M M M M M M M M M M M M M M M M M M M
235 State Stre Unit 204 ursement 10, 2011 House Senate President District: First, Middle Initial) gress PO Box 9394 ursement	State MA Disbursement For Primary Other (or: y General (specify) ▼	Category/	Date of Disbursement M M M M M M M M M M M M M M M M M M M
235 State Stre Unit 204 ursement 10, 2011 House Senate President District: First, Middle Initial) gress PO Box 9394 ursement	State MA Disbursement For Primary Other (or: y General (specify) ▼	Category/	Amount of Each Disbursement this Period 5000.00 Event: February 10, 2011 Transaction ID: 38620897 Date of Disbursement 0 2 M / D D D / Y Z O Y Y 2 0 Y 1 Y 2 0 Y 1 Y 2 0 Y 1 Y 2 0 Y 1 Y 3 0 Y 1 Y 4 Y 2 0 Y 1 Y 4 Y 2 0 Y 1 Y 5 Y 2 0 Y 1 Y
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House Senate President District: First, Middle Initial) gress PO Box 9394	Disbursement For Primary Other (or: y General (specify) ▼	Category/	Event: February 10, 2011 Transaction ID: 38620897 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
House Senate President District: First, Middle Initial) gress PO Box 9394	Disbursement For Primary Other (or: y General (specify) ▼ Zip Code	Category/	Event: February 10, 2011 Transaction ID: 38620897 Date of Disbursement 0 2 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
House Senate President District: First, Middle Initial) gress PO Box 9394	Primary Other (y General specify) Zip Code	Category/	Transaction ID: 38620897 Date of Disbursement 0 2
House Senate President District: First, Middle Initial) gress PO Box 9394	Primary Other (y General specify) Zip Code		Transaction ID: 38620897 Date of Disbursement 0 2
Senate President District: First, Middle Initial) gress PO Box 9394	Primary Other (y General specify) Zip Code		Transaction ID: 38620897 Date of Disbursement 0 2
President District: First, Middle Initial) gress PO Box 9394 ursement	Other (specify) ▼ Zip Code		Date of Disbursement O 2
, First, Middle Initial) gress PO Box 9394 ursement	State	Zip Code		Date of Disbursement O 2
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Senate President	X Primary	y General (specify) ▼		, , ,
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, First, Middle Initial)				Transaction ID: 38620898 Date of Disbursement
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Senate President				
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	Senate President	House Disbursement For Senate Primar Other (District:	ribution House Disbursement For: Senate Primary General Other (specify) ▼	ribution Disbursement For: Senate President District: O11 Category/ Type Primary General Other (specify) ▼

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 43 / 49
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one) 22 X 23 24 25 28a 28b 28c 29 1
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name		d by any person	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	ic and address of any pointed		mon contributions from such committee
Massachusetts Mutual Life Insurance Con	npany Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Cor	nmittee		Transaction ID: 38620901 Date of Disbursement
Mailing Address 499 South Capitol St., S	W, #100		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & T \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & T & T \end{bmatrix} $
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement 2011 Nat'l Party Contribution		011	15000.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		2011 Nat'l Party Contribu- tion
State: District:			
Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Commit	tee		Transaction ID: 38620902 Date of Disbursement
Mailing Address 120 Maryland Ave., NE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & T \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \\$
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Perio
Purpose of Disbursement 2011 Nat'l Party Contribution		011	15000.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		2011 Nat'l Party Contribu- tion
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 38620903
National Republican Congressional Comn	nittee		Date of Disbursement
Mailing Address 320 First Street, SE			02 07 7 2011
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Perio
Purpose of Disbursement 2011 Nat'l Party Contribution		011	15000.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		2011 Nat'l Party Contribu- tion
State: District:			
SURTOTAL of Disbursements This Page (entires)			45000.00
SUBTOTAL of Disbursements This Page (optional)		>	45000.00

SCHEDULE B (FEC Form 3X)

		Use separate schedule(s	())K LINE neck only					, ,		44 / 4	-
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		È	21b 27	22 28a	X	23 28b	П	24 28c		25 29	20
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam												
\setminus	NAME OF COMMITTEE (In Full)												
/	Massachusetts Mutual Life Insurance Com	pany Political Action Co	е										
	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee					Trans		on ID			904		
	Mailing Address Ronald Reagan Republic					0 2) 7	/ Y	ž	0 1 1	Y
	425 2nd Street, NE	State Zip Code				Amou	unt of	f Each	Diah	uroor	nont	this P	Pariod
	City Washington	DC 20002				Amou	int o	Eaci	DISC	-	-		-
	Purpose of Disbursement 2011 Nat'l Party Contribution			01	1						ΙΟUC	00.00	_
	Candidate Name			ateg Typ	ory/ e								
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_	State: District: Full Name (Last, First, Middle Initial)					T.,		ID	- 00	705	24.5		
	Capuano For Congress Committee							sburs	emen			V	V
	Mailing Address PO Box 440305					0 2	IVI		6	′ L	Ž	0 1 1	
	City Somerville	State Zip Code MA 02144				Amou	int o	f Each	n Disb	urser		this P	
	Purpose of Disbursement Event: February 16, 2011			01	1						300	00.00	
	Candidate Name Rep. Michael E. Capuano		1	ateg Typ	ory/ e								
	9 1	ement For: 2012 Primary General Other (specify)				Event	:: F	ebrua	ary 1	6, 20)11		
_	State: MA District: 08												
	Full Name (Last, First, Middle Initial) Ryan For Congress					Trans Date	of Di	sburs	emen	8193 t			
	Mailing Address P. O. Box 1919					0 2	М	^D 2	28	/ L	ž	0 1 1	Y
	City Janesville	State Zip Code WI 53547				Amou	ınt o	f Each	n Disb	urser	nent	this P	eriod
	Purpose of Disbursement Event: February 28, 2011			01	1	L.					400	00.00	
	Candidate Name Rep. Paul D. Ryan				ory/								
	Senate X President	ement For: 2012 Primary General Other (specify)	1	, i		Event	: Fe	ebrua	ry 28	3, 20	11		
	State: WI District: 01												
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	SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)				IUMBE	R:			PAG	GΕ	45 / 4	19	
	ITEMIZED DISBURSEMENTS	for each	category of the	´	(cr	neck o	niy d						$\overline{}$		_	1
		Detailed:	Summary Page		Н	21b 27		22 28a	X	23 28b	Н	24 28c	Н	25 29	\vdash	26 30b
ı	Any Information copied from such Reports and Statem	onto may n	at ha aald ara	d by			<u></u>				-			-	<u> </u>	300
	or for commercial purposes, other than using the name														•	
	NAME OF COMMITTEE (In Full)															
	Massachusetts Mutual Life Insurance Com	pany Polit	tical Action Co	omm	itte	е										
	Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	: 39	92754	156			
A.	21st Century Majority Fund							Date o	of D	isburs	emer					
	Mailing Address 6065 Roswell Road, #22	74						0 ^M 2	М	[/] 1	8	/ LY	ž	0 1 1	Y	
		State GA	Zip Code 30328					Amou	nt o	f Each	Disl	bursen	nent	this F	Perio	od
	Purpose of Disbursement Void - Stale Check	<u>GA</u>	30320		01	1							100	00.00		
	Candidate Name			C	ateg Typ	ory/										
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ccify) ▼	•				Void -	Sta	ale Cl	heck	Κ				
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В.	Full Name (Last, First, Middle Initial)									-		92754	157			
	Pete King For Congress Committee							Date o		isburs		nt	/	· V ·	ν.	
	Mailing Address Post Office Box 1428							0 2	IVI	/ L 2	21	/ L	ž	0 1 1	1	
		State NY	Zip Code 11783					Amou	nt o	f Each	Disl	bursen	nent	this F	Perio	od
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	Candidate Name Rep. Peter T. King			C	ateg Typ	•										
	Office Sought: X House Disburse Senate President	ment For: Primary Other (spe	2010 X General	•				Void -	Sta	ale Cl	heck	Κ				

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	-2000.00
TOTAL This Period (last page this line number only)	•	90000.00

State: NY

District: 03

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		BURSEMEN		Detailed S	category of the Summary Page		À	21b 27	22 X 28a	П	23 28b		3c	25 29	
r fo	r commercial purposes	d from such Reports poses, other than usi IITTEE (In Full) Mutual Life Insura	ng the name	and addres	ss of any political	com	mitte	e to s							S
E	Full Name (Last, FBRIAN K. PITA	First, Middle Initial) NIELLO 5403 20TH ST							Date		burse	387 ement		6 2 0 1	1 Y
_	City		S	tate	Zip Code					unt of				nt this	
L	_ÚBBOCK Purpose of Disbur	sement	Т	X	79407-2111	_		_						125.00	
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	City MECHANICSBI	JRG		tate PA	Zip Code 17050-2371				Amou	unt of	Each	Disbu	rseme	nt this	Perio
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	Office Sought:	House Senate President District:		nent For: Primary Other (spe	General Cify) ▼		Туре	•	ACH	Draf	t Ret	urn			
	Full Name (Last, F Γ.J. Shaughnes	First, Middle Initial)							Date	of Dis	burse	392 ement			
N	Mailing Address	133 RIVERWA	LK WAY						0 ^M 2	М /	0	3 /	<u> </u>	ž 0 1 ·	1
	City MANCHESTER			tate NH	Zip Code 03101-2642				Amou	unt of	Each	Disbu		nt this	
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	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)			E NUMBER: PAC ly one)			PAGE	SE 47 / 49		
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		À	21b 27	22 X 28a		23 28b	24 28	Sc	25 29	
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam											;
\rangle	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance Com	npany Political Action Co	mm	itte	9							
<u>v</u>	Full Name (Last, First, Middle Initial) PATRICK D. OLSEN						saction of Dis		392 ement	75599	9	
	Mailing Address 2505 DEVILS GLEN RD					0 ^M 2	M /	^D 0	^D /	Y 2	2 0 1 1	Y
	City BETTENDORF	State Zip Code IA 52722-6715				Amou	unt of	Each	Disbur	semer	nt this F	
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	Full Name (Last, First, Middle Initial) ALLEN W. CARR					Date	saction of Dis	burse				Υ
	Mailing Address 427 RHODA DR					0 2		1	8	2	0 1 1	
	City LANCASTER	State Zip Code PA 17601-3669				Amou	unt of	Each	Disbur	semer	nt this F	Perio
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	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼				Refur	nd of	Cont	rib			
	Full Name (Last, First, Middle Initial) JEFFREY A. KEIM					Date	of Dis	burse				
	Mailing Address 6127 FOREST EDGE D	R				0 ^M 2	М /	0	8	2	2 0 1 1	Y
	City WHITEHOUSE	State Zip Code OH 43571-9744				Amou	unt of	Each	Disbur	semer	nt this F	
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		Use separate schedule(s)		NUMBER:	PAGE 48 / 49
		for each category of the Detailed Summary Page	21b	22 23 2	24 25 26 28c 29 30b
	Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam				
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance Com	npany Political Action Co	mmittee		
Α.	Full Name (Last, First, Middle Initial) SAMUEL H. SCHIFFER			Transaction ID: 39 Date of Disbursement	t
	Mailing Address 509 EDGEBROOK LN			02 / 11	2011
	City WEST PALM BEACH	State Zip Code FL 33411-5302		Amount of Each Disb	
	Purpose of Disbursement Refund of Contrib		010		100.00
	Candidate Name		Category/ Type		
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		Refund of Contrib	
_	State: District:				
В.	Full Name (Last, First, Middle Initial) William C. Haycox			Transaction ID: 39 Date of Disbursement	
	Mailing Address 513 58TH ST			0 2 M / 2 2	^Y ^Y 20111
	City VIRGINIA BCH	State Zip Code VA 23451-2230		Amount of Each Disb	ursement this Period
	Purpose of Disbursement Refund of Contrib		010		100.00
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	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) ▼		Refund of Contrib	

		 	200.00
SUBTOTAL of Disbursements This Page (optional)			200.00
TOTAL This Period (last page this line number only)	•	 	645.45

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE (check only	NE NUMBER: PAGE 49 / 49					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22 23 28b	24 25 26 28c 29 30b				
Any Information copied from such Reports and State or for commercial purposes, other than using the name of the commercial purposes.								
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurance Cor	mpany Political Action C	ommittee						
Full Name (Last, First, Middle Initial) Chase PaymenTech Mailing Address P.O. Box 29534			Transaction ID: 3 Date of Disburseme	ent				
Senate President	State Zip Code AZ 85038 sement For: Primary General Other (specify)	001 Category/ Type	Amount of Each Dis	48.03 ech process-				
State: District: Full Name (Last, First, Middle Initial) American Express Merchant Services Mailing Address P.O. Box 53852			Transaction ID: 3 Date of Disburseme					
City Phoenix Purpose of Disbursement Feb-11 AMEX Processing Fees Candidate Name	State Zip Code AZ 85072	001 Category/ Type	Amount of Each Dis	sbursement this Period 561.51				
Office Sought: House Disburs Senate	ement For: Primary General	•	Feb-11 AMEX Pro	ocessing Fe-				

Other (specify)

SUBTOTAL of Disbursements This Page (optional)	•	609.54
TOTAL This Period (last page this line number only)	—	609.54

State: